PTO/SB/21 (08-03)

		Application Number	10/712,365
TRANSMITTAL		Filing Date	11/12/2003
FORM		First Named Inventor	Nathan R. Every
(to be used for all correspondence after initial filing)		Art Unit	1615
		Examiner Name	
Total Number of Pages in This Submission	4	Attorney Docket Number	00065.01R
Total Number of Pages in This Submission	4 ENCLO		

ENCLOSURES (check all that apply)						
Fee Transmittal Form	Drawing(s)	After Allowance communication to Group				
Fee Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences				
Amendment / Reply	Petition	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)				
After Final	Petition to Convert a Provisional Application	Proprietary Information				
Affidavits/declaration(s)	Power of Attomey, Revocation Change of Correspondence	Status Letter				
Extension of Time Request	Terminal Disclaimer	Other Enclosure(s) (please identify below):				
Express Abandonment Request	Request for Refund	1. Request for Withdrawal as Attorney or Agent (in triplicate)-3 pages				
Information Disclosure Statement	CD, Number of CD(s)	2. Return Receipt Postcard				
Certified Copy of Priority Document(s)	Remarks					
Response to Missing Parts/ Incomplete Application						
Response to Missing Parts						
under 37 CFR 1.52 or 1.53						
SIGNATU	RE OF APPLICANT, ATTORNEY, OR AGEN	IT				
Firm Elaine C. Stracker	43,166					
or Individual name						
Signature Kaune	A Such					
Date DEC. 1 3 200						

	CERTIF	ICATE OF TRANSMIS	SION/MAILIN	G	
I hereby certify that this co sufficient postage as first	orrespondence is being fac class mail in an envelope a	simile transmitted to the USP addressed to: Commissioner f	TO or deposited wit or Patents, P.O. Bo	h the United States Postal Servic x 1450, Alexandria,VA 22313-14	e with 50 on the
Typed or printed name	Elaine C. Stracker	200			
Typod or printed hame					

This collection of information is required by 37 CFR 1.5. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/712,365	
Filing Date	11/12/2003	
First Named Inventor	Nathan R. Every	
Art Unit	1615	
Examiner Name		
Attorney Docket Number	00065.01R	

To: Commissioner for l P.O. Box 1450 Alexandria, VA 223						
I hereby apply to withdraw as attorney or agent for the above identified patent application.						
The reasons for this requ		•	• •			
This request is being made for the reason that the Assignee no longer retains the attorney of record as an employee. The						
Assignee is currently handling t	heir own patent prosecution.					
	CORRESPONDENCE ADDRE	:00		··········		
1. The corresponden	ce address is NOT affected by this with					
<del>-</del>	pondence address and direct all future		ondence	to:		
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Customer Number						
OR L						
Firm or Individual Name	IP Department (Alexza MDC)					
Address	1001 East Meadow Circle	-			·· <del>-</del>	
Address						
City	Palo Alto	State	CA		ZIP	94303
Country		-				
Telephone		Fax	,			
This request is made on	behalf of myself and					
all the attorneys/age	nts of record,					
, – , ,	(with registration numbers) listed on the a	ttached p	aper(s), o	<u>י</u>		
	associated with Customer Number					
	plicate (including any attachments).					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	C. Stracker	Docietes	Ainn Nin	42 166		
Signature Sax	a Color	Registra	uon ivo.	43,166		
Date DEC.			46	-4 le4	20 -1	
NOTE: Withdrawal is effective approval of withdrawal and the withdraw is normally disappro-	when approved rather than when received e expiration date of a time period for respon ved.	nse or po	ssible exte	at least ension pe	su da eriod,	the request to

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## **REQUEST FOR WITHDRAWAL** AS ATTORNEY OR AGENT

Application Number	10/712,365
Filing Date	11/12/2003
First Named Inventor	Nathan R. Every
Art Unit	1615
Examiner Name	
Attorney Docket Number	00065.01R

To: Commissioner for P.O. Box 1450 Alexandria, VA 223						
I hereby apply to withdraw as attorney or agent for the above identified patent application.						
The reasons for this request are:						
· ·	the reason that the Assignee no longer retains	s the attor	ney of reco	ord as an	emplo	yee. The
	CORRESPONDENCE ADDRE	ESS		<del></del>		
1. The corresponden	ce address is NOT affected by this with	ndrawal.				
2. X Change the corres	spondence address and direct all future	corresp	ondence	to:		
Customer Number						
Firm or Individual Name IP Department (Alexza MDC)						
Address	1001 East Meadow Circle					
Address						
City	Palo Alto	State	CA		ZIP	94303
Country				•		
Telephone		Fax				
This request is made on behalf of myself and all the attorneys/agents of record, the attorneys/agents (with registration numbers) listed on the attached paper(s), or the attorneys/agents associated with Customer Number						
	plicate (including any attachments).					
<del></del>	. Stracker	Desistan	tion No.	42 166		
Signature	( Licas	Registra	uon No.	43,166		
Date DEC	1 3 2004	d Helosa	there are	ot loant	20 4-	ve hotween
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.						

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/712,365
Filing Date	11/12/2003
First Named Inventor	Nathan R. Every
Art Unit	1615
Examiner Name	
Attorney Docket Number	00065.01R

To: Commissioner for P.O. Box 1450 Alexandria, VA 223						
I hereby apply to withdraw as attorney or agent for the above identified patent application.						
The reasons for this requ	est are:					
	he reason that the Assignee no longer retains	the attori	ey of reco	rd as an emplo	yee. The	
Assignee is currently handling t	heir own patent prosecution.					
	CORRESPONDENCE ADDRE	SS				
1. The corresponden	ce address is NOT affected by this with	ndrawal.				
2. X Change the corres	pondence address and direct all future	correspo	ondence	to:		
Customer Number						
OR						
Firm or Individual Name	IP Department (Alexza MDC)					
Address	1001 East Meadow Circle				···	
Address						
City	Palo Alto	State	CA	ZIP	94303	
Country						
Telephone		Fax				
This request is made on	behalf of myself and					
all the attorneys/age						
	s (with registration numbers) listed on the a	ttached pa	aper(s), o	r T		
	s associated with Customer Number					
1	plicate (including any attachments).					
	C. Stracker	Registra	ion No.	43,166		
Signature Date NFC	4.2.2004		1			
NOTE: Withdrawal is effective	1 3 2004 when approved rather than when received	I. Unless	there are	at least 30 da	ıys between	
approval of withdrawal and the withdraw is normally disappro	e expiration date of a time period for respor	nse or pos	sible exte	ension period,	the request to	

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.